PATENT APPLICATION

DECLARATION AND POWER OF ATTORNEY

ATTORNEY DOCKET NO. MS1-1747US

NO. 305496.01

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name I believe I am the original, first and sole inventor (if only one name is listed below) or plural names are listed below) of the subject matter which is claimed and for which

and joint inventor (if ight on the invention

entitled: Security Associations for Devices

the specification of which is filed herewith unless the following box is checked:

was filed on February 27, 2004 as US Application Serial No. or PCT International Application

Number 10/789,809

I hereby state that I have reviewed and understood the contents of the above-identified specification, including the claims, as amended by any amendment(s) referred to above. I acknowledge the duty to disclose all information which is material to patentability as defined in 37 CFR 1.56.

Foreign Application(s) and/or Claim of Foreign Priority

I hereby claim foreign priority benefits under Title 35, United States Code Section 119 of any foreign application(s) for patent or inventor(s) certificate listed below and have also identified below any foreign application for patent or inventor(s) certificate having a filing date before that of the application on which priority is claimed:

COUNTRY	APPLICATION NUMBER	DATE FILED	PRIORITY CLAIMED UNDER 35 U.S.C. 119	
			YES: NO:	
			YES: NO:	

POWER OF ATTORNEY:

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) associated with

Customer No. 22801

to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

Send Correspondence to:	Direct Telephone Calls To:
David S. Lee Lee & Hayes, PLLC	(206) 315-4001
421 West Riverside Avenue, Suite 500 Spokane, WA 99201	

DECLARATION AND POWER OF ATTORNEY

ATTORNEY DOCKET NO. MS1-1747US

MS DOCKET NO. 305496.01

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of Inventor: Trevor W. Freeman	Citizenship: UK		
Residence: Sammamish, WA			
Post Office Address: 2022 236th Ave. SE, Sammamish, WA 98079	•		
	*		
J James	6/15/04		
Inventor's Signature	Date		
Full Name of Inventor: Tim Moore	Citizenship: U.K.		
Residence: Bellevue, WA			
Post Office Address: 1223 167th Avenue SE, Bldg. 40, Suite 4086, Bellev	ue, WA 98008		
Inventor's Signature	Date		
Full Name of Inventor: Bernard Aboba	Citizenship: USA		
Residence: Bellevue, WA			
Post Office Address: 15600 NE 8th St., Suite B1, Bellevue, WA 98008			
Inventor's Signature	Date		

I hereby declare that all statements mad and belief are believed to be true; and statements and the like so made are pun States Code and that such willful false st	d further that these :	statements were I orisonment, or bot	made with the knowledge the h, under Section 1001 of Title 1	18 of the United
Full Name of Inventor: Trevor W. Freeman			Citizenship: UK	·
	,		•	
Residence: Sammamish, WA	9			•
Post Office Address: 2022 236th Ave. SE, Sa	mmamish, WA 98079	•		1.
•	•	·		٠, ٠
		•		
Inventor's Signature	<u>. </u>	1	Date	
1 ,	•	;	· ,	
•		•		• •
Full Name of Inventor: Tim Moore		•	Citizenship: U.K.	•
Residence: Bellevue, WA			٠.	
Post Office Address: 1223 167th Avenue SE,	, Bldg. 40, Suite 4086, B	ellevue, WA 98008		
٠.				
			•	
		· · · · ·	In Imu	24
Investodo Cimetros		<u> </u>	Date Date	
Inventor's Signature			, ,	
			•	
			Citizanshin, IICA	
Full Name of Inventor: Bernard Aboba			Citizenship: USA	•
Residence: Bellevue, WA		1		

DECLARATION AND POWER OF ATTORNEY

MS1-1747US

Post Office Address: 15600 NE 8th St., Suite B1, Bellevue, WA 98008

Inventor's Signature

MS DOCKET NO. 305496.01

Date

DECLARATION AND POWER OF ATTORNEY

ATTORNEY DOCKET NO.

MS1-1747US

MS DOCKET NO. 305496.01

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of Inventor: Trevor W. Freeman	Citizenship: UK	
Residence: Sammamish, WA		
Post Office Address: 2022 236th Ave. SE, Sammamish, WA 98079		
Inventor's Signature	Date	
Mir Carrol V O Igrian II		
Full Name of Inventor: Tim Moore	Citizenship: U.K.	
Residence: Bellevue, WA		
Post Office Address: 1223 167th Avenue SE, Bldg. 40, Suite 4086, Bellevue,	WA 98008	
Inventor's Signature	Date	
Full Name of Inventor: Bernard Aboba	Citizenship: USA	
	Children, Co.	
Residence: Bellevue, WA		
Post Office Address: 15600 NE 8th St., Suite B1, Bellevue, WA 98008		